

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation GUN OWNERS OF AMERICA, INC.		3. FEC Identification Number C C90011693
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 8001 FORBES PLACE SUITE 102		
(c) City, State and ZIP Code SPRINGFIELD VA 22151-2205		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
- ☒ 24-Hour Report
☐ 48-Hour Report

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y Y Y	10 / 23 / 2012
THROUGH	
M M / D D / Y Y Y Y Y Y	10 / 23 / 2012

6. TOTAL CONTRIBUTIONS

33132.51

7. TOTAL INDEPENDENT EXPENDITURES

33132.51

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Walter J. Olson

Walter J. Olson

10/24/2012

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-A **ITEMIZED RECEIPTS**

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)
GUN OWNERS OF AMERICA, INC.

A. Full Name (Last, First, Middle Initial) Gun Owners of America, Inc.			Date of Receipt	
Mailing Address 8001 Forbes Place Suite 102			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>10 / 23 / 2012</div>	
City Springfield	State VA	Zip Code 22151-2205	Transaction ID : F56.000001	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 33132.51	
Name of Employer			Occupation	

B. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div>	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C				
Name of Employer			Occupation	

C. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div>	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C				
Name of Employer			Occupation	

D. Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div>	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee. C				
Name of Employer			Occupation	

SUBTOTAL of Receipts This Page (optional)

33132.51

TOTAL This Period (last page carry total to Line 6)

33132.51

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 6
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

GUN OWNERS OF AMERICA, INC.

Full Name (Last, First, Middle Initial) of Payee Desumo Strategies		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address 9211 Forest Hill Avenue Suite 207		Amount 3875.00	
City Richmond	State VA	Zip Code 23235	
Purpose of Expenditure Mailing services		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Denny Rehberg		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 17492.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Desumo Strategies		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address 9211 Forest Hill Avenue Suite 207		Amount 1192.72	
City Richmond	State VA	Zip Code 23235	
Purpose of Expenditure Mailing services		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Mourdock		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1192.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Desumo Strategies		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address 9211 Forest Hill Avenue Suite 207		Amount 1192.72	
City Richmond	State VA	Zip Code 23235	
Purpose of Expenditure Mailing services		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: Jackie Walorski		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1192.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		6260.44	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 6
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

GUN OWNERS OF AMERICA, INC.

Full Name (Last, First, Middle Initial) of Payee Desumo Strategies		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address 9211 Forest Hill Avenue Suite 207		Amount 1192.72	
City Richmond	State VA	Zip Code 23235	Transaction ID : F57.000004
Purpose of Expenditure Mailing services	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Joe Donnelly		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1192.72		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Desumo Strategies		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address 9211 Forest Hill Avenue Suite 207		Amount 1192.71	
City Richmond	State VA	Zip Code 23235	Transaction ID : F57.000005
Purpose of Expenditure Mailing services	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Brendan Mullen		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1192.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Desumo Strategies		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address 9211 Forest Hill Avenue Suite 207		Amount 22603.51	
City Richmond	State VA	Zip Code 23235	Transaction ID : F57.000006
Purpose of Expenditure Mailing services	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Mourdock		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 23796.23		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	24988.94
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 6
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

GUN OWNERS OF AMERICA, INC.

Full Name (Last, First, Middle Initial) of Payee i360 LLC		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address P.O. Box 37046		Amount 941.57	
City Baltimore	State MD	Zip Code 21297	Transaction ID : F57.000007
Purpose of Expenditure List rental for mailing	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Mourdock		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 24737.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee i360 LLC		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address P.O. Box 37046		Amount 235.39	
City Baltimore	State MD	Zip Code 21297	Transaction ID : F57.000008
Purpose of Expenditure List rental for mailing	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Mourdock		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 24973.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee i360 LLC		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address P.O. Box 37046		Amount 235.39	
City Baltimore	State MD	Zip Code 21297	Transaction ID : F57.000009
Purpose of Expenditure List rental for mailing	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Jackie Walorski		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1428.11		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1412.35
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 6 OF 6
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

GUN OWNERS OF AMERICA, INC.

Full Name (Last, First, Middle Initial) of Payee i360 LLC		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address P.O. Box 37046		Amount 235.39	
City Baltimore	State MD	Zip Code 21297	Transaction ID : F57.000010
Purpose of Expenditure List rental for mailing	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: IN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Joe Donnelly		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1428.11		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee i360 LLC		Date MM / DD / YYYY 10 / 23 / 2012	
Mailing Address P.O. Box 37046		Amount 235.39	
City Baltimore	State MD	Zip Code 21297	Transaction ID : F57.000011
Purpose of Expenditure List rental for mailing services	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IN <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Brendan Mullen		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1428.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....		470.78	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		33132.51	